

**UTILITY
PATENT APPLICATION
TRANSMITTAL**

(Only for new nonprovisional applications under 37 CFR 1.53(b))

Attorney Docket No.

201085US-2

First Inventor or Application Identifier

Shinichiro KA

Title

METHOD, SYSTEM AND COMPUTER PROGRAM PRODUCT FOR
ASSEMBLING AN OPTICAL MODULE

Assignee Name: The Furukawa Electric Co., Ltd.

Assignee Address: 6-1, Marunouchi 2-chome, Chiyoda-ku, TOKYO, JAPAN 100-8322

APPLICATION ELEMENTS

See MPEP chapter 600 concerning utility patent application contents

ADDRESS TO:

Assistant Commissioner for Patents
Box Patent Application
Washington, DC 20231

1. ☒ Fee Transmittal Form (e.g. PTO/SB/17)
(Submit an original and a duplicate for fee processing)
2. ☒ Specification Total Sheets **39**
3. ☒ Drawing(s) (35 U.S.C. 113) Total Sheets **16**
4. ☐ Oath or Declaration Total Pages
- a. ☐ Newly executed (original or copy)
- b. ☐ Copy from a prior application (37 C.F.R. §1.63(d))
(for continuation / divisional w/ box 17 completed)
- i. ☐ **DELETION OF INVENTOR(S)**
Signed statement attached deleting inventor(s) named in
the prior application, see 37 C.F.R. §1.63(d)(2) and
1.33(b).
5. ☐ CD-ROM or CD-R in duplicate, large table or Computer
Program (*Appendix*)
6. ☐ Nucleotide and/or Amino Acid Sequence Submission
(if applicable, all necessary)
- a. ☐ Computer Readable Form (CRF)
- b. Specification or Sequence Listing on:
- i. ☐ CD-ROM or CD-R (2 copies); or
- ii. ☐ Paper
- c. ☐ Statements verifying identity of above copies

ACCOMPANYING APPLICATION PARTS

7. ☐ Assignment Papers (cover sheet & document(s))
8. ☒ Application Data Sheet. See 37 CFR 1.76
9. ☐ 37 C.F.R. §3.73(b) Statement (when there is an assignee) ☐ Power of Attorney
10. ☐ English Translation Document (if applicable)
11. ☐ Information Disclosure Statement (IDS)/PTO-1449 ☐ Copies of IDS Citations
12. ☐ Preliminary Amendment
13. ☒ White Advance Serial No. Postcard
14. ☒ Certified Copy of Priority Document(s) (1)
(if foreign priority is claimed)
15. ☐ Applicant claims small entity status.
See 37 CFR 1.27
16. ☒ Other: Request for Priority
List of Inventors

17. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below:

☐ Continuation ☐ Divisional ☐ Continuation-in-part (CIP) of prior application no.:

Prior application information: Examiner:

Group Art Unit:

For CONTINUATION OR DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 4b, is considered a part of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.

18. Amend the specification by inserting before the first line the sentence:

- ☐ This application is a ☐ Continuation ☐ Division ☐ Continuation-in-part (CIP)
of application Serial No. Filed on
- ☐ Which was published in English
- ☐ Which was not published in English
- ☐ This application claims priority of provisional application Serial No. Filed

19. CORRESPONDENCE ADDRESS



22850

(703) 413-3000

FACSIMILE: (703) 413-2220

Name:	Gregory J. Maier	Registration No.:	25,599
Signature:	<i>P. Signore</i>	Date:	5-1-01
Name:	Philippe J. C. Signore, Ph.D.	Registration No.:	43,922

Docket No. 201085US-2

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

INVENTOR(S) Shinichiro IIZUKA

SERIAL NO: NEW APPLICATION

FILING DATE: HEREWITH

FOR: METHOD, SYSTEM AND COMPUTER PROGRAM PRODUCT FOR ASSEMBLING AN OPTICAL MODULE

1c672 U.S. PTO
09/845158
05/01/01

FEE TRANSMITTAL

ASSISTANT COMMISSIONER FOR PATENTS
WASHINGTON, D.C. 20231

FOR	NUMBER FILED	NUMBER EXTRA	RATE	CALCULATIONS
TOTAL CLAIMS	74 - 20 =	54	× \$18 =	\$972.00
INDEPENDENT CLAIMS	8 - 3 =	5	× \$80 =	\$400.00
<input type="checkbox"/> MULTIPLE DEPENDENT CLAIMS (If applicable)			+ \$270 =	\$0.00
<input checked="" type="checkbox"/> LATE FILING OF DECLARATION			+ \$130 =	\$130.00
BASIC FEE				\$710.00
TOTAL OF ABOVE CALCULATIONS				\$2,212.00
<input type="checkbox"/> REDUCTION BY 50% FOR FILING BY SMALL ENTITY				\$0.00
<input type="checkbox"/> FILING IN NON-ENGLISH LANGUAGE			+ \$130 =	\$0.00
<input type="checkbox"/> RECORDATION OF ASSIGNMENT			+ \$40 =	\$0.00
TOTAL				\$2,212.00

- ☐ Please charge Deposit Account No. 15-0030 in the amount of _____ A duplicate copy of this sheet is enclosed.
- ☒ A check in the amount of **\$2,212.00** to cover the filing fee is enclosed.
- ☒ The Commissioner is hereby authorized to charge any additional fees which may be required for the papers being filed herewith and for which no check is enclosed herewith, or credit any overpayment to Deposit Account No. 15-0030. A duplicate copy of this sheet is enclosed.

Respectfully Submitted,

OBLON, SPIVAK, McCLELLAND,
MAIER & NEUSTADT, P.C.

P. Signore

Gregory J. Maier
Registration No. 25,599

Philippe J. C. Signore, Ph.D.
Registration No. 43,922

Date: _____

5-1-01



22850

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(OSMMN 10/00)

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

IN RE APPLICATION OF: Shinichiro IIZUKA

FILING DATE: Herewith

FOR: METHOD, SYSTEM AND COMPUTER PROGRAM PRODUCT FOR ASSEMBLING AN OPTICAL
MODULE

LIST OF INVENTORS' NAMES AND ADDRESSES

ASSISTANT COMMISSIONER FOR PATENTS
WASHINGTON, D.C. 20231

SIR:

Listed below are the names and addresses of the inventors for the above-identified patent application.

Shinichiro IIZUKA

c/o The Furukawa Electric Co., Ltd.
6-1, Marunouchi 2-chome
Chiyoda-ku, TOKYO, 100-8322 JAPAN

A declaration containing all the necessary information will be submitted at a later date.

Respectfully Submitted,

OBLON, SPIVAK, McCLELLAND,
MAIER & NEUSTADT, P.C.

P-Ligne

Gregory J. Maier
Registration No. 25,599

Philippe J. C. Signore, Ph.D.
Registration No. 43,922

1. **General Information**
 Name: _____
 Address: _____
 City: _____ State: _____ Zip: _____
 Phone: _____
 E-mail: _____
 Date: _____

2. **Personal Information**
 Age: _____ Sex: _____
 Height: _____ Weight: _____
 Blood Type: _____
 Marital Status: _____
 Number of Children: _____
 Occupation: _____
 Education: _____
 Religion: _____
 Ethnicity: _____
 Languages Spoken: _____
 Hobbies: _____
 Pets: _____
 Medical History: _____
 Allergies: _____
 Current Medications: _____
 Insurance: _____
 Social Security Number: _____
 Driver's License: _____
 Military Service: _____
 Criminal Record: _____
 Financial Information: _____
 Credit History: _____
 Bank Accounts: _____
 Investments: _____
 Real Estate: _____
 Vehicles: _____
 Other Assets: _____
 Other Liabilities: _____
 Other Information: _____
 Signature: _____
 Printed Name: _____
 Title: _____
 Date: _____

3. **Family Information**
 Spouse: _____
 Children: _____
 Parents: _____
 Siblings: _____
 Other Family Members: _____
 Family History: _____
 Family Values: _____
 Family Traditions: _____
 Family Goals: _____
 Family Challenges: _____
 Family Strengths: _____
 Family Weaknesses: _____
 Family Interests: _____
 Family Hobbies: _____
 Family Pets: _____
 Family Medical History: _____
 Family Allergies: _____
 Family Current Medications: _____
 Family Insurance: _____
 Family Social Security Numbers: _____
 Family Driver's Licenses: _____
 Family Military Service: _____
 Family Criminal Records: _____
 Family Financial Information: _____
 Family Credit History: _____
 Family Bank Accounts: _____
 Family Investments: _____
 Family Real Estate: _____
 Family Vehicles: _____
 Family Other Assets: _____
 Family Other Liabilities: _____
 Family Other Information: _____
 Family Signature: _____
 Family Printed Name: _____
 Family Title: _____
 Family Date: _____

4. **Education Information**
 School: _____
 Degree: _____
 Major: _____
 Minor: _____
 GPA: _____
 Honors: _____
 Awards: _____
 Scholarships: _____
 Internships: _____
 Research: _____
 Publications: _____
 Presentations: _____
 Conferences: _____
 Seminars: _____
 Workshops: _____
 Courses: _____
 Professors: _____
 Advisors: _____
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 Teachers: _____
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